## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Our Voice PAC	
	C C00497412
Check if 24-hour report 48-hour report New report Amends report file	d on M M M / D D / Y Y Y Y Y
Full Name of Payee	Date of Public Distribution/Dissemination
Jameson Media	10 21 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 348 Mill St.	Amount
City State Zip Code	6000.00
Reno NV 89501	Transaction ID : SE.7915 Date of Disbursement or Obligation
Purpose of Expenditure MEDIA PRODUCTION  Category/ Type	10 18 2014
Name of Federal Candidate Support Offic	ce Sought: House District:
KEVIN WADE Oppose	President Senate State: DE
Calendar Year-To-Date Per Election for Office Sought  Disk 2014	oursement For: Primary
Full Name of Payee RENO PRINT STORE	Date of Public Distribution/Dissemination
Mailing Address 280 GREG ST, STE 5	10 21 2014 Amount
City State Zip Code	24067.89
RENO NV 89502	Transaction ID : SE.7910  Date of Disbursement or Obligation
Purpose of Expenditure MAILINGS Category/ Type	10 / 21 / 2014
Name of Federal Candidate Support Office	ce Sought: House District:
KEVIN WADE Oppose	President Senate State:
Calendar Year-To-Date Per Election for Office Sought  Dist 201	bursement For: Primary General  Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	30067.89
(b) SUBTOTAL of Unitemized Independent Expenditures	4 4
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not me with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
Robert Fee  [Electronically Filed] Date	10 21 2014
Signature	